

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Mar 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000056157

1. Corporation Name

Prudential General Insurance Agency of Florida, Inc.

Principal Place of Business	Mailing Address
1489 North Military Trail - Suite 207 West Palm Beach, FL 33409	SAME

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 1489 N. Military Trail		26 SAME		July 2, 1996		N/A	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22 207		27		65-0673155		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23 W. Palm Beach FL 33409		28		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Country		7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24 33409		25 Palm Beach		29		30	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
Corporation Service Company 1201 Hays Street Tallahassee, FL 32301				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			
				FL			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PLEASE SEE ATTACHED.	1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-STATE-ZIP		1.4 CITY-STATE-ZIP	
		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	2.2 NAME	
NAME		2.3 STREET ADDRESS	
STREET ADDRESS		2.4 CITY-STATE-ZIP	
CITY-STATE-ZIP		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	3.2 NAME	
NAME		3.3 STREET ADDRESS	
STREET ADDRESS		3.4 CITY-STATE-ZIP	
CITY-STATE-ZIP		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	4.2 NAME	
NAME		4.3 STREET ADDRESS	
STREET ADDRESS		4.4 CITY-STATE-ZIP	
CITY-STATE-ZIP		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	5.2 NAME	
NAME		5.3 STREET ADDRESS	
STREET ADDRESS		5.4 CITY-STATE-ZIP	
CITY-STATE-ZIP		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	6.2 NAME	
NAME		6.3 STREET ADDRESS	
STREET ADDRESS		6.4 CITY-STATE-ZIP	
CITY-STATE-ZIP		200002106862 -03/07/97--01005--014 ***173.75	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Ronald P. Make Ronald P. Make, Vice President 908-946-5902

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

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PRUDENTIAL INSURANCE BROKERAGE, INC.
LIST OF PRINCIPAL OFFICERS AND DIRECTORS BUSINESS ADDRESSES

DIRECTORS

Thomas Wayne Crawford
23 Main Street
Holmdel, New Jersey 07733

Richard Milton Green
23 Main Street
Holmdel, New Jersey 07733

Mark Brown Grier
751 Broad Street
Newark, New Jersey 07102-3777

John Molans Ingram
2390 E. Camelback Road
Suite #210
Phoenix, Arizona 85016-3438

Joyce Robinson Leibowitz
80 Livingston Avenue
Roseland, New Jersey 07068-1701

Thomas Ernest Minerva
80 Livingston Avenue
Roseland, New Jersey 07068-1701

Richard Otto Painter
1111 Durham Avenue
South Plainfield, New Jersey 07080-2398

Anthony Steven Pizel
213 Washington Street
Newark, New Jersey 07102-2992

Isaac Edward Price
213 Washington Street
Newark, New Jersey 07102-2992

John Vincent Scicutella
80 Livingston Avenue
Roseland, New Jersey 07068-1701

William Frisby Yelverton
751 Broad Street
Newark, New Jersey 07102-3777

OFFICERS

Thomas Wayne Crawford (Chairman of the Board)
23 Main Street
Holmdel, New Jersey 07733

John Molans Ingram (President)
2390 E. Camelback Road
Suite #210
Phoenix, Arizona 85016-3438

Alan Lee Kohl (Vice President)
7225 North Mona Lisa Road
Suite #208
Tuscon, Arizona 85741

Ronald Paul Make (Vice President)
23 Main Street
Holmdel, New Jersey 07733

Louis John Zuccaro (Vice President and Secretary)
7337 E. Doubletree Ranch Road
Scottsdale, Arizona 85258

Richard Milton Green (Comptroller)
23 Main Street
Holmdel, New Jersey 07733

Nicholas Adam Hencoski (Treasurer)
23 Main Street
Holmdel, New Jersey 07733

As of 12/31/96